

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000040210

**Entity Name:** THE BEST VACATION HOMES LLC

**Current Principal Place of Business:**

6236 KINGSPONTE PKWY  
SUITE 5  
ORLANDO, FL 32819

**Current Mailing Address:**

6236 KINGSPONTE PKWY  
SUITE 5  
ORLANDO, FL 32819 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

VICTORIA, ELLEN  
6236 KINGSPONTE PKWY  
SUITE 5  
ORLANDO, FL 32819 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name VICTORIA, ELLEN  
Address 6236 KINGSPONTE PKWY SUITE 5  
City-State-Zip: ORLANDO FL 32819

Title MGR  
Name FIRMINO DE SOUZA, EDSON L  
Address 6236 KINGSPONTE PKWY SUITE 5  
City-State-Zip: ORLANDO FL 32819

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ELLEN VICTORIA

MGR

01/07/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date